



17000 MONTEREY RD. MORGAN HILL CALIFORNIA 95037  
T. 408-782-0008 F. 408-779-5450

## PARK RESERVATION FORM

***Must be submitted at least 10 working days prior to requested use. Please include a processing fee of \$17.00.***  
**Checks should be made payable to: City of Morgan Hill. The processing fee will be refunded if your event date is not available.**

### PLEASE PRINT

Name of Individual/Group\Organization: \_\_\_\_\_  
Name of **Representative** for Group\Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

### FACILITIES DESIRED

Park and Area Requested \_\_\_\_\_  
Date of Event: \_\_\_\_\_ Type of Event: \_\_\_\_\_  
Starting Time: (include set-up) \_\_\_\_\_  
Ending Time: (include clean-up) \_\_\_\_\_  
Total Estimated Number of People Attending: \_\_\_\_\_  
Will a jumphouse be rented \_\_\_\_ Yes \_\_\_\_ No (Additional insurance is required to have a jumphouse on city property. Please

**\*Alcoholic beverages are prohibited in all parks except when a special events permit has been issued**

***\*Please note no vehicles are to be brought onto the park grass or cement pathways.***

### HOLD HARMLESS AGREEMENT:

I understand that I and my group or organization will be responsible for any damage or abuse of City buildings, grounds or equipment growing out of the occupancy or use of said premises or equipment by our reservation. We agree to abide by all rules and regulations governing the use of buildings, grounds and equipment and hold the City of Morgan Hill and their employees free and harmless from any loss, claims or liability or damage, and/or injuries to persons and property that in any way may be caused by applicants' use or occupancy of said facilities and hold harmless from all claims resulting from this use. The applicant understands the City of Morgan Hill, its officers, and employees are not responsible for any injuries or losses caused to anyone participating in any way in this activity. A \$50.00 refundable deposit is required for the use of the BBQ crank. You will lose your deposit if you fail to return the crank in a timely manner.

I, the undersigned, have read and understand the rules and regulations for facility/park use.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Application Received: \_\_\_\_\_

Facility/Park: \_\_\_\_\_ is available \_\_\_\_\_ is not available

Additional Personnel Required: \_\_\_\_\_

Requires: open/close \_\_\_\_\_ Other: \_\_\_\_\_

Assignment of Personnel: \_\_\_\_\_

Insurance Coverage Required: Yes: \_\_\_\_\_ No: \_\_\_\_\_

Certificated Received: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Date Received: \_\_\_\_\_

Approval: \_\_\_\_\_ Denied: \_\_\_\_\_

If denied, reason why: \_\_\_\_\_

City Representative: \_\_\_\_\_ Date: \_\_\_\_\_